

"Express Mail" mailing label number EV530260643US

PTO/SB/01 (6-95)

Approved for use through: 10/31/98 OMB 0651-0032

Type a plus sign (+) inside this box + ☐

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

0010/PTO Rev. 6/95 U.S. Department of Commerce Patent and Trademark Office DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing	Attorney Docket Number	C 2845 PCT/US
	First Named Inventor	MOUSSOU, Philippe
	COMPLETE IF KNOWN	
	Application Number	10/561,551
	Filing Date	12/20/2006
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ESTERS OF FLAVONOIDS WITH ω -SUBSTITUTED C6-C22 FATTY ACIDS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **06/11/2004** as United States Application Number or PCT International

Application Number **PCT/EP2004/006281** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority		Certified Copy Attached?	
			Not Claimed		YES	NO
03013899.4	EP	06/20/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

Express Mail
Label No. EV530261238US

Type a plus sign (+) inside this box + ☐

C. 2845 PCT/US

DECLARATION

Page 2

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP2004/006281	06/11/2004	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name Customer Number or label

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
John F. Daniels	34,314		
Jane E. Alexander	36,014		
Arthur G. Seifert	28,040		
Daniel S. Ortiz	25,123		

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.


Please direct all correspondence to: ☒ Customer Number or label 23657 OR ☐ Fill in correspondence address below

Name	Jane E. Alexander				
Address					
Address					
City		State		Zip	
Country		Telephone	215-628-1474	Fax	215-628-1345

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name	Philippe	Middle Initial		Family Name	Moussou	Suffix e.g. Jr.	
------------	----------	----------------	--	-------------	---------	-----------------	--

Inventor's Signature		Date	25.11.2005
----------------------	---	------	------------

Residence: City	Nancy	State		Country	France	Citizenship	France
-----------------	-------	-------	--	---------	--------	-------------	--------

Post Office Address	14, rue de Marsal				
---------------------	-------------------	--	--	--	--

Post Office Address					
---------------------	--	--	--	--	--

City	54000 Nancy	State		Zip		Country	France	Applicant Authority	
------	-------------	-------	--	-----	--	---------	--------	---------------------	--

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

Type a plus sign (+) inside this box + ☐

C 2845 PCT/US

										ADDITIONAL INVENTOR(S) Supplemental Sheet	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	Aude		Middle Initial		Family Name	Falcimaigne		Suffix e.g. Jr.			
Inventor's Signature						Date	20/12/05				
Residence: City	Nancy		State		Country	France		Citizenship	France		
Post Office Address	140 avenue du General Leclercq										
Post Office Address											
City	54000 Nancy		State		Zip		Country	France		Applicant Authority	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	Mohamed		Middle Initial		Family Name	Ghoul		Suffix e.g. Jr.			
Inventor's Signature						Date	6/12/05				
Residence: City	Nancy		State		Country	France		Citizenship	France		
Post Office Address	43, rue Charles Martel										
Post Office Address											
City	54000 Nancy		State		Zip		Country	France		Applicant Authority	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	Louis		Middle Initial		Family Name	Danoux		Suffix e.g. Jr.			
Inventor's Signature						Date	25/11/2005				
Residence: City	Saulxures Les Nancy		State		Country	France		Citizenship	France		
Post Office Address	12, rue de Bretagne										
Post Office Address											
City	54420 Saulxures Les Nancy		State		Zip		Country	France		Applicant Authority	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	Gilles		Middle Initial		Family Name	Pauly		Suffix e.g. Jr.			
Inventor's Signature						Date	1/12/05				
Residence: City	Nancy		State		Country	France		Citizenship	France		
Post Office Address	5, rue de Begonlas										
Post Office Address											
City	54000 Nancy		State		Zip		Country	France		Applicant Authority	
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto											